U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD 665576 Substitute for Form PTO-875 OTHER THAN APPLICATION AS FILED - PART I OR SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) RATE (\$) FEE (\$) FOR NUMBER FILED NUMBER EXTRA RATE (\$) FEE (\$) BASIC FEE (37 CFR 1.16(a), (b), or (c)) SEARCH FEE (37 CFR 1.16(k), (i), or (m)) EXAMINATION FEE (37 CFR 1.16(o), (p), or (q)) TOTAL CLAIMS = OR minus 20 = (37 CFR 1.16(i)) INDEPENDENT CLAIMS = minus 3 = х (37 CFR 1.16(h)) If the specification and drawings exceed 100 sheets of paper, the application size fee due APPLICATION SIZE is \$250 (\$125 for small entity) for each FEE (37 CFR 1.16(s)) additional 50 sheets or fraction thereof. See 35 U.S.C: 41(a)(1)(G) and 37 CFR 1.16(s) MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j)) \* If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II OTHER THAN OR (Column 2) (Column 3) SMALL ENTITY (Column 1) SMALL ENTITY HIGHEST CLAIMS PRESENT REMAINING NUMBER RATE (\$) ADDI RATE (\$) ADD 19105 TIONAL **AFTER** TIONAL FEE (\$) **PREVIOUSLY** EXTRA ENDMENT FFF (k) AMENDMENT PAID FOR Total (37 CFR 1.16(i)) 22 Minus = 22 OR = Independent (37 CFR 1.16(h)) Minus = = = х OR Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(i)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 3) (Column 1) (Column 2) HIGHEST CLAIMS PRESENT RATE (\$) RATE (\$) REMAINING NUMBER ADDI-ADDI- $\mathbf{\omega}$ **EXTRA** TIONAL **AFTER PREVIOUSLY** TIONAL FEE (\$) ENDMENT AMENDMENT FEE (\$) PAID FOR Total Minus (37 CFR 1.16(i)) OR Minus = Independent (37 CFR 1.16(h)) = = OR х Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) OR **TOTAL** TOTAL OR ADD'L FEE ADD'L FEE

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

<sup>\*\*\*</sup> If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10665576

CLAIMS AS FILED - PART I								<u> </u>				
		CLAIMS AS	(Column		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			72					RATE	FEE	]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		[	BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			7 2 minus 20=		• 7			X\$ 9=		OR	X\$18=	36
INDEPENDENT CLAIMS			4 mi	nus 3 =	• /			X42=		OR	X84=	84.
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter *0" in colu						olumn 2	L	TOTAL		OR		84 X 7 0
CLAIMS AS AMENDED - PART II											OTHER	
		(Column 1)	(Column 2			(Column 3)		SMALL E	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* ·	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+280=	
								TOTAL		OR	TOTAL	
		A	DDIT. FEE			ADDIT. FEE						
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colur HIGH NUM PREVIO PAID	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	AAA		=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	ENDENT	CLAIM		┚┞	+140=		OR	+280=	
	•									OR	TOTAL	
		_	DDIT. FEE <b>L</b>			ADDIT. FEE	·					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	] [	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	1	X42=		OR	X84=	
<b>L</b>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE OR											TOTAL ADDIT. FEE	
444	if the "Highest Nu	mber Previously P nber Previously Pa	aid For IN THI	S SPACE	s less tha	n 3, enter "3."	~		ropriate box			